



FH
[REDACTED]

STATE OF WISCONSIN
Division of Hearings and Appeals

In the Matter of

[REDACTED]
[REDACTED]
[REDACTED]

DECISION

MGE/149991

PRELIMINARY RECITALS

Pursuant to a petition filed June 12, 2013, under Wis. Stat. § 49.45(5), and Wis. Admin. Code § HA 3.03(1), to review a decision by the Racine County Department of Human Services in regard to Medical Assistance, a hearing was held on July 10, 2013, at Racine, Wisconsin.

The issue for determination is whether Racine County Department of Human Services (the agency) correctly determined that Petitioner is eligible for Medicaid if he meets a deductible.

NOTE: The record was held open to allow Petitioner to submit a list of ailments and to allow the agency to provide proof that Petitioner's SSI –Medicaid ended, budget screen print outs and a July 5, 2013 notice.

Petitioner's list of ailments has been marked as Exhibit 6 and entered into the record. The agency submitted Petitioner's member information, which has been marked as Exhibit 7; a deductible screen and budget screens which have been marked collectively as Exhibit 8 and a July 5, 2013 notice that has been marked as Exhibit 9. All three exhibits have been entered into the record.

There appeared at that time and place the following persons:

PARTIES IN INTEREST:

Petitioner:

[REDACTED]
[REDACTED]
[REDACTED]

Respondent:

Department of Health Services
1 West Wilson Street
Madison, Wisconsin 53703

By: Kathy Christman, Lead Financial Employment Placement Specialist
Racine County Department of Human Services
1717 Taylor Avenue
Racine, WI 53403

ADMINISTRATIVE LAW JUDGE:

Mayumi M. Ishii

Division of Hearings and Appeals

FINDINGS OF FACT

1. Petitioner (CARES # [REDACTED]) is a resident of Racine County.
2. On May 24, 2013, Petitioner reported his Social Security Disability Income had ended and that he would now be receiving Social Security Retirement Income. (Testimony of Ms. Christman)
3. On May 28, 2013, the agency sent Petitioner a notice indicating that his application for Medicaid was denied and that he would not be enrolled May 1, 2013, forward. (Exhibit 4)
4. Petitioner filed a request for fair hearing that was received by the Division of Hearings and Appeals on June 12, 2013. (Exhibit 1)
5. Petitioner filed a new application for Medicaid benefits on June 14, 2013. (See Exhibit 1; testimony of Ms. Christman)
6. On July 5, 2013, the agency sent Petitioner a notice indicating that effective August 1, 2013, he would be eligible for healthcare benefits, if he met an unspecified deductible. (Exhibit 9)
7. Beginning April 2013, Petitioner began receiving Social Security Retirement Income in the amount of \$909.00 per month. (Exhibits 1 and 3)
8. Petitioner pays \$288 per month in rent. (Exhibit 1 and 9)

DISCUSSION

Social Security income is considered when determining eligibility for healthcare/Medicaid. *Medicaid Eligibility Handbook (MEH) §15.4.10*. In determining eligibility there is a general deduction from reported income of \$20. *MEH §15.3.8 General Income Disregard*.

The categorically needy income limit is \$549.11 + actual shelter costs up to \$232.67. (For Petitioner this limit would be \$549.11 + \$232.67 = \$781.78, since Petitioner's rent exceeds \$232.67) *MEH §39.4.1 - EBD Assets and Income Table*. The medically needy income limit for a household of one is \$591.67. *Id.*

If an individual does not meet the categorically needy income limit, his income is compared to the medically needy income limit. If the individual's income falls between the two income limits, he is eligible for Medicaid. *MEH §24.1*

Petitioner did not dispute the fact that as of May 1, 2013, he was receiving \$909.00 per month in Social Security Retirement Income. If one subtracts the \$20 general deduction, the income considered for Petitioner is \$889.00. This is over both the \$781.78 categorically needy income limit and the \$591.67 medically needy income limit. Thus, Petitioner's income is over the program limits.

"When a Medicaid applicant is ineligible for Medicaid solely because he has income that exceeds the Medicaid medically needy income limit, he can become eligible by meeting the Medicaid deductible." *MEH §24.2* "The Medicaid deductible is the group's total excess monthly income over the 6 consecutive months of the Medicaid deductible period." *Id.* "Excess monthly income" is defined as the amount above the medically needy income limit. *Id.* In Petitioner's case the deductible calculation would be as follows:

$$\$889.00 - \$591.67 \times 6 = \$1783.98$$

Petitioner should note that the Medicaid deductible period is a period of six consecutive months and begins in the month which the applicant chooses. *MEH §24.3* "The applicant can choose to begin the Medicaid deductible period as early as three months prior to the month of application and as late as the

month of application.” *Id.* So, if Petitioner is able to meet the deductible, he could theoretically begin the deductible period May 1, 2013 and end it October 31, 2013, if he incurred medical expenses prior to his June 14, 2013 application.

CONCLUSIONS OF LAW

Racine County Department of Human Services correctly determined that Petitioner is eligible for Medicaid if he meets a deductible.

THEREFORE, it is

ORDERED

That the Petition is dismissed.

REQUEST FOR A REHEARING

This is a final administrative decision. If you think this decision is based on a serious mistake in the facts or the law, you may request a rehearing. You may also ask for a rehearing if you have found new evidence which would change the decision. Your request must explain what mistake the Administrative Law Judge made and why it is important or you must describe your new evidence and tell why you did not have it at your first hearing. If you do not explain these things, your request will have to be denied.

To ask for a rehearing, send a written request to the Division of Hearings and Appeals, P.O. Box 7875, Madison, WI 53707-7875. Send a copy of your request to the other people named in this decision as "PARTIES IN INTEREST." Your request for a rehearing must be received no later than 20 days after the date of the decision. Late requests cannot be granted.

The process for asking for a rehearing is in Wis. Stat. § 227.49. A copy of the statutes can be found at your local library or courthouse.

APPEAL TO COURT

You may also appeal this decision to Circuit Court in the county where you live. Appeals must be served and filed with the appropriate court no more than 30 days after the date of this hearing decision (or 30 days after a denial of rehearing, if you ask for one).

For purposes of appeal to circuit court, the Respondent in this matter is the Department of Health Services. After filing the appeal with the appropriate court, it must be served on the Secretary of that Department, either personally or by certified mail. The address of the Department is: 1 West Wilson Street, Madison, Wisconsin 53703. A copy should also be sent to the Division of Hearings and Appeals, 5005 University Avenue, Suite 201, Madison, WI 53705-5400.

The appeal must also be served on the other "PARTIES IN INTEREST" named in this decision. The process for appeals to the Circuit Court is in Wis. Stat. §§ 227.52 and 227.53.

Given under my hand at the City of Milwaukee,
Wisconsin, this 29th day of July, 2013

\sMayumi M. Ishii
Administrative Law Judge
Division of Hearings and Appeals



State of Wisconsin\DIVISION OF HEARINGS AND APPEALS

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The preceding decision was sent to the following parties on July 29, 2013.

Racine County Department of Human Services
Division of Health Care Access and Accountability